ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| | | | |
| FEE DETERMINATION | HC | | 6-7-01 |
| O.I.P.E. CLASSIFIER | | 10 | 6-19-01 |
| FORMALITY REVIEW | mo | 579 | 8/3/01 |
| RESPONSE FORMALITY REVIEW | JK | 835 | 09/24/01 |
| | | | |

## INDEX OF CLAIMS

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| ✔ | Rejected | N | | Non-elected |
| = | Allowed | I | | Interference |
| − | (Through numeral)... Canceled | A | | Appeal |
| ÷ | Restricted | O | | Objected |

| Claim | | Date | | Claim | | Date | | Claim | | Date |
|---|---|---|---|---|---|---|---|---|---|---|
| Final | Original | | | Final | Original | | | Final | Original | |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)